# GAS SAFETY CERTIFICATE

This form can be used as a Landlord's gas safety certificate

Page 1 of 1 Ser No. 29618

ENGIE

GAS safe REGISTER 574561

Enter Company Registration Number

Engine [redacted]

Gas Sa

Engie Office Address
105 ACCOMMODATION
IFE CRICKET CIRCUIT
SHEFFIELD
S10 3BA

Contract Number 105
Customer Name ENGIE
Site Address ENDCLIFFE NURSE
GLOSSOP AC
SHEFFIELD
Postcode S10 3EL
Received By Signature

Landlords Details If Different
Name
Address
Postcode
Rented Accommodation YES/NO

| App | Landlords appliance Yes/No | Service Inspection Repair | Appliance Details: Location | Type | Model | Serial Number | Burner Manufacturer | Flue Type (OF/RS/FL) |
|---|---|---|---|---|---|---|---|---|
| 1 | YES | SERVICE | FROGGATT AC | BOILER | BAXI POWER QUANTA PRO 115 | 13159071350100 | — | |
| 2 | YES | SERVICE | | BOILER | BAXI POWER QUANTA PRO 115 | 18098112589 20 | — | |
| 3 | YES | SERVICE | | BOILER | BAXI POWER QUANTA PRO 115 | 18098112589 50 | — | |
| 4 | — | — | | — | — | — | — | — |

| General Safety Checks | Result | General Safety Checks | Result |
|---|---|---|---|
| Gas booster/compressor operating correctly (Yes /No/NA) | NA | Flue termination satisfactory (Yes/No/NA) | YES |
| Is there a current gas installation line diagram at primary meter (Yes/No/NA) | YES | Has a tightness test been carried out from local isolation valve (Yes/No/NA) | YES |
| Is the meter installation correct (Yes/No) | YES | Is gas pipework electrically bonded (Yes/No) | YES |
| Gas installation pipework adequately supported (Yes/No) | YES | Are adequate emergency isolation valves fitted (Yes/No) | YES |
| Gas installation pipework sleeved and sealed as appropriate (Yes/No) | YES | Are emergency valve handles in place and labelled (Yes/No) | YES |
| Is gas pipework colour coded or identified (Yes/No/NA) | YES | Do valves fall to the correct position (Yes/No) | YES |
| Is flue system installed in accordance with standards (Yes/No) | YES | Area clear of combustible materials (Yes/No) | YES |

| Ventilation | | | |
|---|---|---|---|
| Low level free area cm² ~~or ventilation flow rate inlet m³/h~~ | Actual 1,537 | Required (Calculated) 1,368 | |
| High level free area cm² ~~or ventilation flow rate extract m³/h~~ | Actual 1,008 | Required (Calculated) 684 | |
| All ventilation grills clear and unobstructed (Yes/No) YES | Fans and/or flue interlocks operating correctly (Yes/No/NA) NA | | |

| Details of any faults | Remedial Action Taken | Comments and calculations |
|---|---|---|
| | | |

| Appliance Checks | App 1 or ~~App 1 High~~ | App 2 or App 1 Low | App 3 or App 2 High | ~~App 4 or App 2 Low~~ | | App 1 or ~~App 1 High~~ | App 2 or App 1 Low | App 3 or App 2 High | ~~App 4 or App 2 Low~~ | | App 1 or ~~App 1 High~~ | App 2 or App 1 Low | App 3 or App 2 High | ~~App 4 or App 2 Low~~ |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Flue flow test satisfactory (Yes/No/NA) | YES | YES | YES | — | Gas burner pressure (mbar) or heat input kW/h required | 114 | 114 | 114 | — | Carbon Dioxide ($CO_2$) (%) | 9.1 | 9.1 | 9.1 | — |
| Spillage test satisfactory (Yes/No/NA) | YES | YES | YES | — | Gas burner pressure (mbar) or heat input kW/h measured | 115.8 | 116.7 | 114.5 | — | Excess Air (%) | 30.2 | 30.2 | 31.3 | — |
| Air/Gas switch operating correctly (Yes/No/NA) | ~~N/A~~ | NA | NA | — | Gas rating measured (kW/h / NA) | 115.8 | 116.7 | 114.5 | — | CO/$CO_2$ Ratio | 0.0005 | 0.0008 | 0.0007 | — |
| Flame proving devices operating correctly (Yes/No/NA) | YES | YES | YES | — | Air/gas ratio control setting (%/NA) | NA | NA | NA | — | Gross Efficiency (%) | 98.9 | 98.9 | 98.9 | — |
| Burner lock out time (seconds) | 67 | 68 | 67 | — | Net flue gas temperature (gross less ambient) (°C) | 52 | 54 | 55 | — | CO flue dilution (ppm) | NA | NA | NA | — |
| Temperature and limit thermostats operating correctly (Yes/No) | YES | YES | YES | — | Oxygen ($O_2$ %) | 5.0 | 4.9 | 5.0 | — | Standing pressure (mbar) | 22.2 | 22.2 | 22.2 | — |
| Heat net input rating data (kW) | 114 | 114 | 114 | — | Carbon Monoxide (CO)(ppm) | 76 | 74 | 66 | — | Working pressure (mbar) | 17.0 | 17.0 | 17.0 | — |
| | | | | | | | | | | **Is appliance safe for use (Yes/No)** | YES | YES | YES | — |
| | | | | | | | | | | Has a warning advice notice been raised (No or Warning notice Ser No or No's) | NO | | | |
| | | | | | | | | | | Test Instrument | ANALOX SPM1 0800 | | | |
| | | | | | | | | | | Test Instrument aerial number | 13005QE590 | | | |

| | |
|---|---|
| Worksheet No ( If used) | 26639641 |
| Checked by (office use) | |
| Entered on database | YES |

**Declaration of gas safety** - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and use) regulations, standards and procedures.

Date 10/6/20

Signature [redacted]

- Customer, Yellow - Service Centre, Pink - Site, Green - Engineer